

Application for Financing



FAX TO:
866-431-8803

FINANCE DEPARTMENT PHONE 408-369-0316 / FINANCE DEPARTMENT FAX 866-431-8803

APPLICANT INFORMATION					CO-APPLICANT INFORMATION						
FIRST NAME		MIDDLE		LAST	FIRST NAME		MIDDLE		LAST		
SOCIAL SECURITY NUMBER	BIRTH DATE	US CITIZEN? YES NO	MARRIED UNMARRIED SEPARATED		SOCIAL SECURITY NUMBER	BIRTH DATE	US CITIZEN? YES NO	MARRIED UNMARRIED SEPARATED			
DRIVER'S LICENSE #					DRIVER'S LICENSE #						
CURRENT STREET ADDRESS (PROVIDE PREVIOUS ADDRESS IF UNDER 3 YRS)					CURRENT STREET ADDRESS (PROVIDE PREVIOUS ADDRESS IF UNDER 3 YRS)						
CITY		STATE	ZIP	HOW LONG?	CITY		STATE	ZIP	HOW LONG?		
HOME PHONE		WORK PHONE		CELL PHONE	HOME PHONE		WORK PHONE		CELL PHONE		
MAILING ADDRESS					MAILING ADDRESS						
MORTGAGE or LANDLORD NAME			OWN RENT OTHER		MORTGAGE or LANDLORD NAME			OWN RENT OTHER			
PURCHASE PRICE		BALANCE		MO. PAYMENT	PURCHASE PRICE		BALANCE		MO. PAYMENT		
PREVIOUS ADDRESS		CITY	STATE	ZIP	HOW LONG?	PREVIOUS ADDRESS		CITY	STATE	ZIP	HOW LONG?
CURRENT EMPLOYER				YEARS	CURRENT EMPLOYER				YEARS		
OCCUPATION / TITLE				GROSS MO. INCOME	OCCUPATION / TITLE				GROSS MO. INCOME		
ADDRESS, CITY, STATE					ADDRESS, CITY, STATE, ZIP						
PREVIOUS EMPLOYER (if less than 3 years at current employer)				YEARS	PREVIOUS EMPLOYER (if less than 3 years at current employer)				YEARS		
OTHER SOURCE OF INCOME PER MONTH **					OTHER SOURCE OF INCOME PER MONTH**						
**(Alimony, child support or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.)					**(Alimony, child support or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.)						
EMAIL ADDRESS:					EMAIL ADDRESS:						
HAVE YOU HAD ANY JUDGMENTS, FORECLOSURES OR BANKRUPTCIES IN THE PAST 10 YEARS? YES NO EXPLAIN:					HAVE YOU HAD ANY JUDGMENTS, FORECLOSURES OR BANKRUPTCIES IN THE PAST 10 YEARS? YES NO EXPLAIN:						

I certify that the information given is true, correct and complete and is given for the purpose of obtaining credit, and 316 LENDING and any other creditor or prospective creditor of the undersigned or any agency employed by you or any of them are authorized to make investigations including credit inquiries and employment verifications concerning the undersigned or concerning the above information and to disclose to each other the information set forth above and the results of such investigations.

ANY FAX TRANSMISSION OF MY SIGNATURE WILL BE HELD EQUALLY ENFORCEABLE AS MY GENUINE SIGNATURE.

APPLICANT'S SIGNATURE _____

DATE _____

CO-APPLICANT'S SIGNATURE _____

DATE _____